



Kentucky **I**nvests in **D**eveloping **S**uccess

Executive Summary

2002



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The KIDS NOW Initiative was designed to establish and to coordinate supports and services needed to ensure that “all young children in Kentucky are healthy and safe, possess the foundation that will enable school and personal success, and live in strong families that are supported and strengthened within their community” (Governor’s Early Childhood Task Force, 1999, p.2).

The 2001-2002 evaluation of the KIDS NOW Initiative demonstrates the rapid implementation of components throughout the state. Additionally, data from this evaluation year reveals the first statewide picture of center-based child care program quality in the state of Kentucky. An integration of data (using surveys, face-to-face interviews, and classroom observations) indicate *five* key findings:

1. Center-based child care program quality in Kentucky is just above minimal standards. Quality is lowest for children who live in poverty. Thus, there is great need for the KIDS NOW Initiative.

Less than 50% of child care teachers have a 4 year degree. Classrooms in child care centers are of mediocre quality for both preschool and infant-toddler programs as measured by standardized instruments. Moreover, in these facilities, the staff turnover rate is high. The quality of infant-toddler care is lower than preschool care. Additionally, the ratio of licensing inspectors to child care programs do not meet standards set by the National Association for the Education of Young Children. Centers serving more low income children tend to be of lower quality. These results lend support to the appropriation of funds for the Initiative.

2. Knowledge and participation in KIDS NOW components are related to overall center quality.

Centers that participated in STARS for KIDS NOW and had more educated teachers tended to have higher quality classrooms, as rated by standardized instruments and observations. Higher quality, center-based programs tend to access information about the Initiative as well as participate in Initiative components more frequently than lower quality programs.



3. *KIDS NOW is still new to many in the field of early care and education in Kentucky. Comprehensive communication about benefits is critical.*

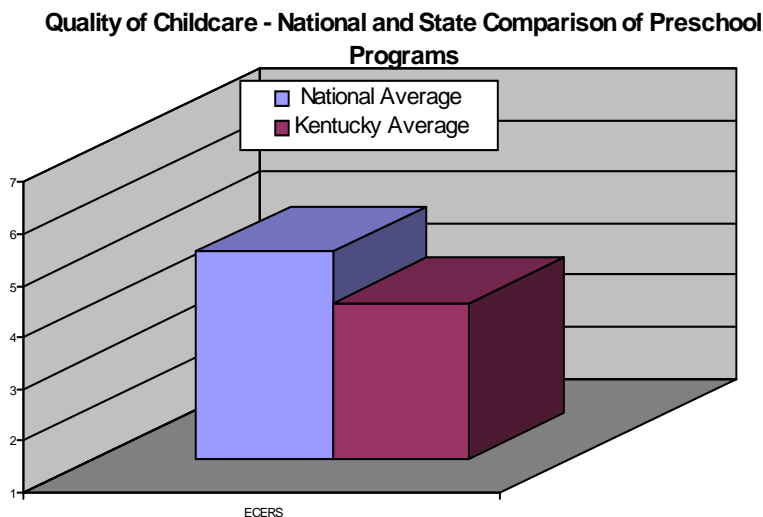
Many center directors are unfamiliar with the Initiative. Most centers are participating in less than half of the KIDS NOW components. These include Healthy Start, KIDS NOW scholarships for child care providers, STARS for KIDS NOW quality rating system, and Community Early Childhood Councils.

4. *Leadership in local child care programs sets the tone.*

Directors are key players. This is confirmed by both qualitative and quantitative data. Directors set the tone for staff and parental involvement. There is a positive relationship between directors' ratings of KIDS NOW benefits and staff ratings of whether participation in components of KIDS NOW was encouraged. Clearly, a directors' involvement and familiarity with the KIDS NOW Initiative is positively related to overall program quality.

5. *Urban and Rural differences exist in the way programs utilize the programs of the KIDS NOW Initiative.*

While urban centers were more likely to utilize the KIDS NOW Scholarship Program, rural centers were more likely to participate in STARS for KIDS NOW and to serve on the Community Councils. Urban parents perceived that centers were more likely to meet the needs of their children and their families than those parents in rural areas. Rural parents were more likely to perceive that needed child care was available and affordable than did urban parents.



Information on child care quality was collected in over 123 early education programs in Kentucky using the Early Childhood Environment Rating Scale—Revised (ECERS). This instrument is designed to assess the global classroom environment including space and furnishings, personal care routines, encouragement of language-reasoning skills, activities offered, interactions, program structure, and provisions for parents and staff. National data is taken from Cost, Quality and Child Outcomes in Child care Centers, Public Report, 2nd edition.

Evaluation Team Recommendations

1. *Expand efforts to enhance program quality in center-based child care programs.*

Results indicate a tremendous need for continued attention on improving program quality. All components of the Initiative, including Healthy Start, KIDS NOW scholarships for childcare providers, STARS for KIDS NOW quality rating system, and Community Early Childhood Councils, have this as their goal.

2. *Target child care directors as the Initiative continues to unfold throughout the state.*

Programs directors provide essential leadership to higher program quality as well as participation in various components of the Initiative. Innovative and supportive strategies specifically targeting directors at low performing centers may enhance participation in the STARS for KIDS NOW and KIDS NOW Scholarship programs as well as improve overall program quality.

3. *Enhance public awareness across all child care components with special emphasis in urban areas for STARS for KIDS NOW and KIDS NOW Scholarships for Childcare Providers .*

Data from this study indicate that child care programs in urban areas are less likely to participate in the STARS for KIDS NOW program. Moreover, urban teachers are less likely to participate in Initiative programs or even know about them. Targeting unique needs is imperative for overall quality improvement.

Higher Participation = Higher Overall Quality

